Key Provisions of HR 3200 Myths vs. Facts
Health Reform and Oregon's Third District
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HR 3200 is the composite of three House committees' work to create a uniquely American solution of quality health care that gives you more control of your health care and peace of mind that it can't be taken away because you get sick or lose your job. Health reform will ensure that you will always be able to get the health care coverage that you need.

Under the House health reform bill, you cannot be denied coverage or have your coverage taken away because of your age or if you or a member of your family had a previous illness.

You will be able to keep your current plan and doctor, if you want. If you don't have health insurance or want to change plans, a choice of public and private health insurance plans will be available to employers and individuals. It will be easy for you to compare plans and determine what the right choice is for you and your family.

Reform will also eliminate piles of unnecessary paperwork that create unending frustration between doctors, patients and insurance companies.

And out of pocket charges will be capped, so Americans will no longer have to fear bankruptcy due to a serious illness or injury.

Congressman Blumenauer and other members of the House have worked tirelessly to address the many complex issues in health care reform. Read the bill or the following summary of what the bill does, organized into six core elements:

- Coverage and Choice
- Affordability

- Shared Responsibility
- Controlling Costs
- Prevention and Wellness
- Workforce Investments

A brief discussion of the above elements follows:

# **Coverage and Choice**

- As stated in Section 111, the bill prohibits insurance providers from excluding those ailing from pre-existing conditions, so that Americans are not denied care.
- In order to protect citizens, the rescission of health insurance coverage without clear and convincing evidence of fraud will also be prohibited. This will require all qualified health benefit programs to provide essential benefits, as defined in Sections 121 through 124, to all covered under the plan. Insurance companies will also be limited in their ability to charge higher rates due to health status, gender, or other factors; instead, premiums will vary based only on age, geography and family size.
- Sections 141 through 144, allows for the establishment of the Health Choices Administration as independent agency, which will manage the Health Insurance Exchange and is imperative to expanding coverage and choice. The Exchange would provide individuals and employers access to a transparent and functional market place of health insurance coverage options, including a public health insurance option. Insurance reform and consumer protection will help low- and middle-income individuals and families obtain insurance.
- Finally, Sections 221 through 226 of the bill will allow for the founding of a much-needed public option. This public option will participate in a market exchange with other private health care options and ensures choice, competition, and stability of affordable, high quality coverage throughout the United States. It will be subject to the same market reforms and consumer protections, and will cover approximately 3 percent of the American public (according to a report by the <a href="Congressional Budget Office">Congressional Budget Office</a>).

## **Affordability**

- Out-of-pocket medical spending for low- and middle-income individuals and families will be capped, to avoid health care-related bankruptcies.
- Sliding scale affordability credits will also be available to those who qualify, making insurance premiums more affordable and reducing cost-sharing to levels that ensure access to care.
- Expansions of Medicaid and improvements to Medicare will be federally funded, to improve provider participation and to fill the donut hold in the Part D Medicare drug program.

# **Shared Responsibility**

- Individuals will be responsible for attaining and continuing health insurance coverage under Section 301. Those who choose not to obtain coverage will pay a penalty of 2.5 percent of modified, adjusted gross income above a specified level.
  - Employers will share responsibility as well. HR 3200 gives employers the option of

providing coverage for their workers or contributing to funds on their behalf. Businesses with less than 25 employees and average wages less than \$40,000 will qualify for a tax credit of up to 50% of the costs of providing health insurance.

• The government will be responsible for ensuring that every American can afford quality health insurances, through consumer protection, insurance reforms, and improvements to Medicare and Medicaid.

#### **Prevention and Wellness**

- The bill also includes a focus on the future health of the nation, largely from a community-based approach. The expansion of Community Health Centers, new data collection efforts to better identify and address racial, ethnic, and regional and other health disparities, as well as strengthening state and local public health departments and programs.
  - The bill will create a national school-based health care program.

#### **Workforce Investments**

- The bill encourages the training of primary care physicians by promoting physician training outside the hospital, where most primary care is currently delivered. An increased training of primary care doctors and an expansion of the pipeline of individuals going into health professions, including primary care, nursing, and public health will overtime shift the focus of the health care industry to prevention and wellness.
- The House bill also recognizes the current strain on health care workforce and addresses needs of loan repayment and training. Additionally, as stated in Sections 2201 and 2231, the National Health Service Corps will establish the Public Health Workforce for "the purpose of ensuring an adequate supply of public health professionals throughout the Nation."

## **Controlling Costs**

- By modernizing and improving the Medicare system, the bill proposes to reward the efficient provision of health care. In improving Medicare Part D, HR 3200 will create new consumer protections for Medicare Advantage Plans.
- The bill will also reduce the rising costs of health care spending in numerous ways. By investing in primary care availability, prevention and wellness, as well as increasing competition and availability of choice through the National Insurance Exchange, HR 3200 will help slow the growth of health care costs over time. Such savings will help families, employers, and taxpayers alike.